

M

PLAINTIFF

DeAndre Crawford

COURT CASE NUMBER

1:18-cv-04882

DEFENDANT

Lieutenant Ms. Bennett

TYPE OF PROCESS

Civil rights action

SERVE

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN



Stateville Correctional Center

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

AT

Joliet, IL. 60434

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

DeAndre Crawford # M30080

P.O. Box 112

Joliet, IL. 60434

Number of process to be served with this Form - 285

Number of parties to be served in this case

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

Fold

Signature of Attorney or other Originator requesting service on behalf of:

De Andre Crawford

PLAINTIFF
 DEFENDANT

TELEPHONE NUMBER

N/A

DATE

11-4-18

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated.

(Sign only first USM 285 if more than one USM 285 is submitted)

Total Process
 3/16

District of Origin
 No. 24

District to Serve
 No. 24

Signature of Authorized USMS Deputy or Clerk

Date

PTD
 11/20/18

I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

Michael Jaron, Attorney

FILED

A person of suitable age and discretion then residing in the defendant's usual place of abode.

Address (complete only if different than shown above)

DEC 19 2010 AM
 CLERK, U.S. DISTRICT COURT
 THOMAS G. BRUTON

Date of Service

12-17-18

Time

4:30 PM

am

Signature of U.S. Marshal or Deputy

eliate Salas

Service Fee <input checked="" type="checkbox"/> 130.00	Total Mileage Charges (including endeavors) <input checked="" type="checkbox"/> 32.70	Forwarding Fee <input type="checkbox"/> -	Total Charges <input checked="" type="checkbox"/> 162.70	Advance Deposits <input type="checkbox"/>	Amount owed to U.S. Marshal or <input type="checkbox"/>	Amount of Refund <input type="checkbox"/>
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REMARKS: 12/12 assigned to Deputy

104SM, 60 miles, 2 hours, 1 ENDEAVOR

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